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** CONTINUING DATA ***** *PONE Mp*** FOREIGN APPLICATIONS ***** *ONE Mp*** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	/HEMANT SHANTILAL PATEL/ Examiner's Signature			HSP Initials	FL ✓	1 ✓	26 ✓	4 ✓

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TITLE

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